

# **NON USE CERTIFICATION MONITORING REPORT** **LOCAL LIMITS**



**NAME:** AL & JOHN, INC. T/A GLEN ROCK HAMS

**MAILING ADDRESS:** 444 MARSHALL STREET, PATERSON, NJ 07503

**FACILITY LOCATION:** SAME

**CATEGORY & SUBPART** N/A **PERMIT #:** 27220041 **OUTLET #:** 1

**CONTACT OFFICIAL:** LOUIS BARRESI **TELEPHONE #:** 742-4990

I have been authorized to certify non-use for the following heavy metals:

Arsenic	<input type="checkbox"/>	Lead	<input checked="" type="checkbox"/>	Zinc	<input type="checkbox"/>	SAMPLE DATE		
						MONTH	DAY	YEAR
Cadmium	<input checked="" type="checkbox"/>	Mercury	<input checked="" type="checkbox"/>			SEPTEMBER	3	2008
Chromium	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>					
Copper	<input checked="" type="checkbox"/>	Nickel	<input checked="" type="checkbox"/>					

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	
Cadmium	Sample Measurement	<0.001	NO	MG/L	COMP
	Threshold Value	0.005		MG/L	
Mercury	Sample Measurement	<0.0005	NO	MG/L	COMP
	Threshold Value	0.001		MG/L	
Nickel	Sample Measurement	0.01	NO	MG/L	COMP
	Threshold Value	0.02		MG/L	
Copper	Sample Measurement	0.091	NO	MG/L	COMP
	Threshold Value	0.092		MG/L	
Lead	Sample Measurement	0.012	NO	MG/L	COMP
	Threshold Value	0.029		MG/L	
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				

PVSC Form MR-3 10/96

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As <input type="checkbox"/>	Cr <input type="checkbox"/>	Pb <input checked="" type="checkbox"/>	Mo <input type="checkbox"/>	Zn <input type="checkbox"/>
Cd <input checked="" type="checkbox"/>	Cu <input checked="" type="checkbox"/>	Hg <input checked="" type="checkbox"/>	Ni <input checked="" type="checkbox"/>	

Therefore, I am required to monitor for these heavy metals only in March and September.

- (2) (a) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have not yet met the non-use certification criteria for the following heavy metals:

		*		*			*
Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	Copper	<input type="checkbox"/>	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>
Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	Lead	<input type="checkbox"/>	<input type="checkbox"/>	Nickel	<input type="checkbox"/>
Chromium	<input type="checkbox"/>	<input type="checkbox"/>	Mercury	<input type="checkbox"/>	<input type="checkbox"/>	Zinc	<input type="checkbox"/>

- (b) \* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6 (a)(2)(ii) revised by 53 FR 40610, October 17, 1988

10/15/2008

Date

*Louis Barresi*  
Signature of Principal  
Executive or Authorized Agent

LOUIS BARRESI  
QUALITY CONTROL SUPERVISOR  
Type Name and Title



## ANALYTICAL DATA REPORT

for  
**Al & John Inc.**  
**444 Marshall Street**  
**Paterson, NJ 07503**

**Project Name: PVSC MONITORING**  
**Lab Case Number: E08-10106**

MDL = METHOD DETECTION LIMIT

&lt; = LESS THAN THE MDL

**Metals**

Lab ID: 10106-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 9/3/2008

Time Sampled: 09:00

Date Analyzed: 9/8/08

Parameter	Result	Q	MDL
Cadmium	< 0.001		0.001
Copper	0.091		0.008
Lead	0.012		0.002
Mercury	< 0.0005		0.0005
Nickel	0.010		0.004
Zinc	0.724		0.008

**General Analytical**

Lab ID: 10106-001

Client ID: 01

Percent Moisture: 100

Date Sampled: 9/3/2008

Time Sampled: 09:00

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	2190	2.00	Aqueous-mg/L	9/3/2008 15:40
Total Suspended Solids	995	125	Aqueous-mg/L	9/9/2008 9:00

These data have been reviewed and accepted by:



*Michael H. Leftin*  
 Michael H. Leftin, Ph.D.  
 Laboratory Director

273 Franklin Road  
 Randolph, NJ 07869  
 Phone: 973 361 4252  
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

[illegible]

Signature/Company	Date	Time	Signature/Company
Relinquished by: 	9/3/05	12:05	Received by: 
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Lab Case # 10106

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